REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:



| | Application Number: 10/658,584 | Confirmation Number: 1932 | | | | | | |
|--|--------------------------------------|---------------------------|--|--|--|--|--|--|
| | Filing Date: September 8, 2003 | | | | | | | |
| | First Named Inventor: Joerg BERINGER | | | | | | | |
| | Group Art Unit: 2162 | | | | | | | |
| | Examiner: Jami, Hares | | | | | | | |
| | | | | | | | | |

| Mail Stop RCE Commissioner for Patents | | | | | | | Examiner: Jami, Hares | | | | | |
|--|---|-------------|--|---------------------|---------------------------------------|------------------------------------|-----------------------|----------------|---------------------|----------------------|--|--|
| P.O. Box 1450 Alexandria, VA 22313-1450 | | | | | Attorr | Attorney Docket Number: 09282-0010 | | | | | | |
| This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. | | | | | | | | | | | | |
| Request for Continued Examination (RCE) practice under 37 C.F.R. § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. | | | | | | | | | | | | |
| 1. | Submission required under 37 C.F.R. § 1.114: Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment. | | | | | | | | | | | |
| | a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. | | | | | | | | | | | |
| | | i. | ☐ Consid | ler the arguments | s in the Ap | peal Br | ief or Reply Brief | fpreviοι | usly filed on [Date | l | | |
| | | ii. | ☐ Other | | | | | - : | | | | |
| | b. | | DO NOT ENTER the | e amendment(s) | previously | filed or | [Date(s)] | · | An alternate sub | mission is attached. | | |
| | C. | \boxtimes | Enclosed submission | n: . | | | | | | | | |
| | | i. | | lment/Reply | | | iii. | | Information Di | isclosure Statement | | |
| | | ii. | ☐ Affidav | rit(s)/Declaration(| s) | | iv. | | Other | | | |
| 2. | Mis | cella | neous | | | | | | | | | |
| | a. | | Suspension of action on the above-mentioned application is requested under 37 C.F.R. § 1.103(c) for a period of [number] months. (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. § 1.17(i) required.) | | | | | | | | | |
| | b. | | Other | | | | , | | | | | |
| | | | | | | | | | | | | |
| 3. | Fee | es | | | | | | | | | | |
| | a. | \boxtimes | The filing fee is calc | | | | | | | | | |
| | | i. | . | 00 RCE fee requir | | | | | | | | |
| | | ii. | | n for extension of | | | | | | | | |
| | | iii. | _ | | | | | | | | | |
| | b. | | Check in the amoun | | | . doficia | naine in the filine | · foon | er aradit any avar | souments to Denosit | | |
| | c. The Commissioner is authorized to charge any deficiencies in the filing fees, or credit any overpayments to Deposit Account 06-0916. | | | | | | | | | | | |
| | | | | Signature of | Applica | nt, Att | orney, or Age | | | | | |
| Naı | me: | c. G | regory Gramenopoul | os (202 | 2) 408-400 | 00 | Reg. No.:36,532 | 21997 | • | | | |
| Finnegan, Henderson, Farabow, Garrett & Dunner, L.L.P. 04/29/2008 MAHMED1 00000075 10658584 | | | | | | | | | | 0075 10658584 | | |
| Signature: Aroma Woods | | | | | Date: April 28, 240050:1801 810.00 0P | | | 810.00 OP | | | | |
| Certificate of Mailing or Transmission | | | | | | | | | | | | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner for Patents, MAIL STOP RCE, P.O. Box 1450, Alexandria, VA. 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on: [Date] | | | | | | | | | | | | |
| Name: [Text] | | | | | | | | | | | | |
| Sign | ature | : | | | | | Date: | | | | | |
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